

ISSUE SLIP - STATION AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>BA</i>	<i>70385</i>	
O.I.P.E. CLASSIFIER			<i>10 12-10-99</i>
FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
1	4 9 2 8 5 10 24
2	17 19 21 24 25 26 27
3	✓
4	✓
5	✓
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7	✓
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10	✓
11	✓
12	✓
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14	✓
15	✓
16	✓
17	✓
18	0 0 0 0 0 0 0
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26	0 0 0 0 0 0 0
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37	0 0 0 0 0 0 0
38	0 0 0 0 0 0 0
39	0 0 0 0 0 0 0
40	0 0 0 0 0 0 0
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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